## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.

maintenance fee notification CURRENT CORRESPONDENCE	S. E ADDRESS (Note: Use Block 1 for	any change of address)	OIP R		Note: A certificate of	mailing can on	ly be used f	for domestic mailings of for any other accompany
42754 75	90 04/04/2005		/ () 1 1 E	15. 188 188	Fee(s) Transmittal. The papers. Each addition have its own certificate.	al paper, such as	s an assignm	ent or formal drawing, m
NIELDS & LEM.	ΔCK	- 1	_	8	Co	rtificate of Mail	ing or Tran	emiecion
176 EAST MAIN STREET, SUITE 7		I hereby certify that this Fee(s) Transmittal is being deposited with the States Postal Service with sufficient postage for first class mail in an e						ng deposited with the Unrst class mail in an envel
WESTBORO, MA		K	- <b>-</b>	Ü	addressed to the Ma transmitted to the USI	il Stop ISSUE   PTO (703) 746-4	FEE address	s above, or being facsin date indicated below.
19/2005 BABRAHA2 000000	)55 10812538	~	BADEM	PA			ooo, on the	(Depositor's na
FC:2501	700.00 OP 300.00 OP 30.00 OP		WITE IN	•	Debra T. Hi	LITUINATI		(Signat
FC:1504 FC:8001					May 16, 200	5		(D
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR			ATTORNEY DO	OCKET NO.	CONFIRMATION NO.
10/812,538	10/812.538 03/30/2004		Robert L. Goldsmith		th	647P002DIV.		3432
TITLE OF INVENTION: BI	OREACTOR PROCESS U	SING AN AIRLIF	T MEMBRA	NE DEV	ICE AND MEMBRA	NE BIOREACTO	OR	
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PU	BLICATION FEE	TOTAL FEE(S) DUE		DATE DUE
nonprovisional	YES	\$700	\$700 \$300		\$1000		07/05/2005	
EXAMINER		ART UNIT		CI	ASS-SUB CLASS	]		
BARRY, CHESTER T		1724			210-601000			
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	HE PATENT	Γ (print o	r type)			
PLEASE NOTE: Unless	an assignee is identified be 37 CFR 3.11. Completion	low, no assignee	data will app	ear on th	e patent. If an assign	nee is identified	below, the o	document has been filed
(A) NAME OF ASSIGNE	) RESIDENCE: (CITY and STATE OR COUNTRY)							
CereMem Corpor	Waltham, MA							
Please check the appropriate			<u> </u>		Individual 🔯 C	orporation or oth	er private gr	oup entity Governm
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):								
☑ Issue Fee ☐ Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment					
Advance Graci - ii of Copies			Deposit Account Number					
5. Change in Entity Status ( a. Applicant claims SN	from status indicated above MALL ENTITY status. See 3	•	D b. Applic	ant is no	longer claiming SMA	LL ENTITY stat	us. See 37 C	FR 1.27(g)(2).
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	s requested to apply the Issu ablication Fee (if required) w rds of the United States Pate	e Fee and Publicat vill not be accepted int and Trademark	ion Fee (if an I from anyone Office.	y) or to it of the other the	e-apply any previousl an the applicant; a reg	y paid issue fee t stered attorney o	o the application of the transfer of the trans	ation identified above. he assignee or other part
Authorized Signature			Date May 16, 2005					
Typed or printed name	Brian M. Ding			Registration	No32	,729		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.